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Q: Do parents always have a right to know when their teen is seeking birth control?

Posted Oct. 23, 2002

By Rep. Jan Schakowsky

NO: Forcing parental notification will lead to deadly illegal abortions and higher rates of teen pregnancy.

Meeting Becky Bell's parents and hearing their story was one of the most moving experiences of my life. Becky, her mother told me, was a healthy 17-year-old who got along well with her parents and lived in a safe neighborhood. She died before age 18 because parental-notification laws in her state left her with what she believed was no other choice but to have an illegal abortion.

As she lay dying, holding her mother's hand, she still was too ashamed to tell her mother what had happened. "Becky, tell mommy what happened," her mother asked. Becky refused because she was afraid to disappoint her parents. It wasn't until the doctor told Becky's mother the cause of her death that she knew the truth. She would have done anything — paid for the abortion, driven Becky to the hospital — if she could have changed the fact that her daughter was dead. But it was too late.

Unfortunately, some in government refuse to acknowledge the sometimes-deadly consequences of parental-notification laws and insist that these laws are necessary to protect girls and young women. Tell that to Becky's parents; the Bells have lost their daughter forever.

Right now, officials at the state and federal levels are trying to take away young people's rights to reproductive-health services, including access to contraceptives, family planning and abortion. What we know from Becky's story and the experts is that such efforts will put the health and lives of our children at extreme risk — the risk of sexually transmitted diseases, back-alley abortions and unintended teen pregnancies.

For example, the House passed the so-called Child Custody Protection Act (HR 476) that would bring criminal charges against a grandmother who helps her granddaughter get an abortion. However, this legislation fails to consider that the young woman

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may have an abusive family and would be in danger if she informed her parents. Another bill, the State's and Parental Rights Improvement Act of 2002 (HR 4783) would require the parent or guardian to consent before a prescription drug or device is dispensed to a minor. It is clear that the intended goal of this legislation is to deny young women access to birth-control drugs, yet the unintended consequences of this bill would be more teen-age mothers and illegal abortions.

According to the American Medical Association (AMA), "The desire to maintain secrecy has been one of the leading reasons for illegal-abortion deaths." As parents, we can only hope that our children, both young women and men, will trust us to help them make decisions. And, of course, we hope they will sit down and consult with us when it comes to decisions about their health and sexual activity. And many do. But to require by law that teen-age girls tell their parents about their reproductive choices is to put in danger the lives and health of young women and to deny the reality many face today. The government cannot mandate healthy family communication where it does not already exist.

Some teens will forgo medical treatment, counseling and testing if that information is disclosed to their parents. A study that appeared in the Journal of the American Medical Association this year found that out of 950 sexually active teen-age girls, 47 percent said they no longer would use reproductive-health clinics, and an additional 12 percent stated that they would delay or stop testing for pregnancy or sexually transmitted diseases, if their parents had to be told.

Another study found that 58 percent of high-school students in three public schools in Massachusetts had health concerns they did not feel comfortable sharing with their parents. Furthermore, another study of adolescents found that one-half of teens would seek confidential treatment for sexually transmitted diseases if it were available, yet only 15 percent would seek such treatment if parental consent or notice were required.

Studies also demonstrate that requiring parental consent or notification for family-planning services will cause many teens — fearing abuse, punishment and parental disappointment — to delay or avoid needed medical care. In Idaho, a 13-year-old sixth-grader was shot to death by her father once he learned she was preparing to have an abortion to terminate a pregnancy caused by his act of incest.

We must face this reality and work to help teens receive the treatment, counseling and support they need when it comes to reproductive health. Teens must have access to the necessary information to help them make sound decisions that not only affect

their personal lives, but their long-term health and economic future. Instead of laws that restrict adolescents' access to the care they need, we need to increase access to confidential family planning and other health services.

Every year there are approximately 675,000 unintended teen pregnancies and an estimated 4 million new cases of sexually transmitted diseases among teen-agers. Teen-age girls have a higher risk of pregnancy complications, including death, miscarriage, stillbirth and premature or low birth-weight babies. And young mothers are more likely to have children who will grow up to become teen mothers themselves, thus perpetuating the cycle of poverty. It is dangerous and unfair to place any burdens on young women that could jeopardize their health or lives. Furthermore, it would be unrealistic to expect that mandated family communication would improve those statistics. Confidential access, by contrast, will help give young adults the tools they need to exercise choice and responsibility over their reproductive lives.

In addition to the health risks placed on individuals, there is a public-health risk to requiring parental consent. The rates of teen pregnancy and sexually transmitted diseases likely would increase because fewer teens will access contraceptives and other forms of protection. And the opposite is true when we allow teens to make health-care decisions. For example, the number of teens who sought HIV testing at publicly funded clinics in Connecticut doubled following the state's elimination of parental-consent requirements.

I am not alone in this view. State and medical experts agree that mandatory parental involvement is not beneficial for teens' health. Virtually every state in the union has enacted laws to ensure that young adults have access to necessary and often lifesaving counseling and care for sexually transmitted diseases without parental consent. And 25 states and the District of Columbia allow minors confidential access to contraceptives.

The medical community throughout the country has expressed its opposition to mandatory parental involvement. The AMA, which represents 294,000 professionals, states that parental-consent and notice laws "appear to increase the health risks to the adolescent by delaying medical treatment or forcing the adolescent into an unwanted childbirth."

The American Academy of Family Physicians, the American Academy of Pediatrics, the American College of Obstetricians and Gynecologists, the American Medical Women's Association, the American Society for Reproductive Medicine and the Society for Adolescent Medicine wrote to Congress in 1997 opposing efforts to require mandatory parental notification or consent for young women wishing to receive reproductive-health services.

These organizations wrote, "While we applaud the efforts of Congress to ensure that parents are involved in a minor's health-care decisions, forced parental involvement, in our view, will have a negative impact on the physician-patient relationship, as well as have the unintended consequence of deterring adolescents from seeking important health-care services."

While medical experts agree that adolescents should be trusted with making personal decisions without the interference of federal or state laws, I am not surprised that, no matter how large the volume of evidence may be against forced consent, some still go to great lengths to ignore the facts. They even go as far as supporting measures in Congress that would, for example, criminalize the conduct of a grandmother, a trusted relative or a religious counselor who steps in to help a young woman during difficult times.

In many cases, those who support parental-consent or involvement mandates are ardent supporters of abstinence-only educational programs. That is a shortsighted solution to a complex problem.

The Rev. Thomas R. Davis is a board member of the Religious Coalition for Reproductive Choice and a former chaplain and associate professor of religion at Skidmore College. In March 2000, he wrote that "forced parental notification is likely only to discourage young people who do become sexually active from using contraceptives."

His observation is worth quoting: "In 1993, the Journal of Pediatrics reported that 29 percent of high-school girls would not seek reproductive health care if their parents might find out. Incredibly, those promoting parental notification know this. Apparently, they believe that the potential benefit of a theology of abstinence is well worth the increase in unintended teen pregnancy that, in turn, will increase the number of teen abortions and/or the number of teen parents who are unprepared to care for children that they did not plan to have."

As important as abstinence is, the abstinence-only message fails to provide valuable information about protection against sexually transmitted diseases or pregnancy. The United States has one of the highest teen-pregnancy rates among industrialized nations. And according to a Department of Health and Human Services report, 39 percent of ninth-graders, 47 percent of 10th-graders, 53 percent of 11th-graders and 65 percent of 12th-graders reported having had sexual intercourse. And about 20 percent of young women who engage in intercourse become pregnant each year. That is why a comprehensive approach that ensures that young women have access to confidential reproductive-health and

educational services would help reduce teen pregnancies and sexually transmitted diseases.

Government has an obligation to ensure that families should never have to face what the Bells are enduring today since the death of their daughter Becky. It is not too late.

Rep. Jan Schakowsky (D-Ill.) was elected to Congress in 1998 and is chief deputy minority whip of the U.S. House of Representatives. She serves on the House Financial Services and Government Reform committees, and is the ranking Democrat on the House Government Reform subcommittee on Government Efficiency, Financial Management and Intergovernmental Relations.



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